EXHIBIT K

EXAMINING CARCINOGENS IN TALC AND THE BEST METHODS FOR ASBESTOS DETECTION

HEARING

BEFORE THE

SUBCOMMITTEE ON ECONOMIC AND CONSUMER POLICY

OF THE

COMMITTEE ON OVERSIGHT AND REFORM

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^{* &}quot;Johnson & Johnson Was on Trial for the Opioid Crisis. 33 Lawmakers Took Its Money Anyway," article, Mother Jones; submitted by Rep. Tlaib.
* "Michigan AG Nessel Announces State's \$3.2 Million Share of Multistate Settlement with Johnson & Johnson, Ethicon, Inc.," press statement; submitted by Rep. Tlaib.

STATEMENT OF DR. JACQUELINE MOLINE, PROFESSOR, FEIN-STEIN INSTITUTES FOR MEDICAL RESEARCH AT NORTHWELL HEALTH

Dr. Moline. Good afternoon, Chairman Krishnamoorthi, Ranking Member Jordan, Mr. Comer, and members of the committee. I'm honored to be here today. My name is Dr. Jacqueline Moline. I'm a board certified physician at Northwell Health, specializing in occupational and environmental medicine which deals with the impact of exposures on the health of individuals, including asbestos.

Asbestos has caused thousands of deaths in the United States. Legislation pending, the Alan Reinstein Ban Asbestos Now Act of 2019 is currently under consideration by Congress. It is time for us to ban this deadly substance.

Asbestos fibers are microscopic. About 200,000 asbestos fibers could fit on Abraham Lincoln's nose on the penny. Once these fibers are breathed in, they can penetrate deeply in the lungs and move throughout the body.

The most devastating disease from asbestos is mesothelioma, which is a cancer of the lining of the lungs or the abdomen. It's considered a signature disease, meaning its diagnosis almost always indicates asbestos exposure. As a result, treating doctors ask patients diagnosed with mesothelioma whether they were exposed to asbestos.

For men, the evidence is often easy to identify. Many of my patients sought care because they knew they'd worked with asbestos. For women, sometimes it's easy to identify, because they lived with someone who worked with asbestos and they laundered their dusty clothes. Yet for many women and some men, they had no traditional source of asbestos exposure. As a result, their cancers were considered idiopathic or having no cause. There's no sound scientific reason for a gender discrepancy, apart from workplace exposures and could not be explained merely by chance.

In my opinion, this conundrum has been solved. The presence of asbestos in cosmetic talc more commonly used by women is likely the cause of women's mesothelioma and men's mesothelioma. This talc exposure was their only exposure to asbestos. If doctors aren't aware that asbestos contaminated talcum powder, they don't ask about its use, nor consider it as a source.

To my knowledge, there have been no studies that look at end users of cosmetic talcum powder, but to address this gap, I recently published an article in the Journal of Occupational and Environmental Medicine. My colleagues and I reported on 33 individuals whose only source of asbestos exposure was the cosmetic talc. For six of the 33, we tested their tissue and found asbestos in talc. Years before, other scientists too had looked at lung burdens of women with mesothelioma, found the types of asbestos commonly found in talcum powder, and stated that the asbestos might be used—might be related to their use of contaminated talc.

I'd like to tell you about Ms. D, who is a 66-year old woman who developed shortness of breath, chest wall pain, weight loss, and fatigue. A chest x-ray showed fluid surrounding her lung, and she had 1,600 milliliters of fluid, more than about seven of these water bottles on this table in front of me, removed from her lungs. She eventually had surgery to take tissue samples for diagnosis and

had mesothelioma. She also had a pleural plaque, which is a hallmark finding of prior asbestos exposure. Unfortunately, despite aggressive treatment, she passed away two years after her diagnosis.

She had worked in various industries, including textile and tobacco, and had no exposure to asbestos. However, she did have exposure to cosmetic talc in two settings. She worked part time as a hairdresser for 25 years, and she applied talcum powder to her customers' necks after she cut their hair. She used cosmetic talc on her body for 30 years, beginning with when her mother used talcum powder on her and she later used it on herself. She stated there would be a puff of smoke and it went everywhere. Now, asbestos can linger after that initial application and affect not only the health of the user, but also family members.

In our study, the age of diagnosis was 27 to 88 years. The aver-

age number of years of cosmetic talc use was 32.7.

Cosmetic talc use was not confined to one brand. There were 22 different brands used. Like Ms. D., patients often used more than

one type of cosmetic talcum powder.

Fortunately, mesothelioma is a very rare tumor. Around 3,000 new cases are diagnosed in the United States yearly. Unfortunately, it's not curable. Five-year survival for pleural mesothelioma is less than five percent. Peritoneal mesothelioma is somewhat bet-

In 2019, the Finnish Institute for Occupational Medicine stated that asbestos fibers of a thickness of three micrometers or less and a length of five micrometers or more cause a risk of cancer and pulmonary diseases when inhaled, regardless of whether they've been formed as a result of geological process metamorphosis or an indus-

trial process such as in mining.

What matters to me as a doctor is not the nomenclature. Any particle of asbestos that's small enough to be inhaled is three times longer than it's wide, can cause disease, including mesothelioma. Using terminology to somehow differentiate whether a particle is asbestiform or cleavage fragment obfuscates the issue and is just semantics. If it can be breathed into the lung, the body doesn't care how the fiber grew. From a clinical perspective it's really quite simple.

Millions of individuals have been exposed to asbestos from contaminated talcum powder. There are safer alternatives on the market that don't contain talcum powder or asbestos. In my specialty, we strive to identify, treat, and prevent future illnesses related to exposures and hazards. If there's any possibility of the presence of asbestos, why should we take the chance?

Thank you. I'd be happy to take questions. Mr. Krishnamoorthi. Thank you, Dr. Moline.

Votes were called. We're just going to finish up the opening statements and then recess briefly.

Mr. Etheridge, you have five minutes.

STATEMENT OF DAVID ETHERIDGE, PATIENT

Mr. ETHERIDGE. Good afternoon, Chairman Krishnamoorthi and other members of the subcommittee. Apparently, quiet news days are hard to find around here lately, so I especially appreciate your presence today and your interest in this important topic.